



Can I really afford an Electronic Medical Record?

If it's e-MDs EMR, yes – absolutely! More so than any other company, we have focused on improving charge capture to maximize revenue and optimizing workflow and efficiency to help lower overhead.

How can e-MDs increase a physician's income by over \$100,000 per year?

1. **e-MDs speeds up documentation.** e-MDs Chart has multiple data entry mechanisms to expedite history capture. We utilize templates and pre-defined visits (called Short cuts) for typical, recurrent encounters (like otitis media or post/op visits). Our patent pending FastForm™ even allows the patient to participate in generating some of the history, with lay terms translated into medical terminology (painful urination would be translated into the chart as dysuria). We support multiple data entry preferences such as dictation with voice recognition, free text (typing) and macros to accommodate individual physician preferences. Case studies show that our EMR charting solution can save an average of 12 minutes in documentation time per encounter for moderate to complex office visits.
2. **e-MDs optimizes patient flow.** From check-in to treatment to check-out, our Tracking Board helps the doctors and staff identify bottlenecks and resolve them quickly. The benefit is less waiting time for the patient, more rapid transit through the clinic and the ability to increase patient density without increasing staff stress or workload.
3. **e-MDs improves upon 'point of first contact'.** Our customizable check-in module prompts staff to collect accurate and complete insurance and demographic information so that bills are submitted with correct information the first time, thereby helping to decrease insurance denials.
4. **e-MDs improves charge capture.** Our EMR charting solution automatically calculates the correct E&M code based on the encounter complexity. We also accurately link CPT charges to ICD-9 diagnoses, effectively eliminating the need for the superbill. Appropriate billable supplies (HCPCS) and modifiers also improve average reimbursement per visit. We have published real world examples of average office visit reimbursement (not charges, but collections!) increasing by \$17 to \$24 per visit.
5. **e-MDs eliminates paper charts.** Our integrated DocMan™ scanning module allows the storage of all record types, from scanned paper charts, to x-rays, to lab, to ECGs. Lost charts are a thing of the past, and reviewing charts is far faster than a traditional paper chart.
6. **e-MDs internal email makes back office communication a breeze.** Our integrated messaging system, TaskMan™ allows other members of the team to review refills, messages, lab results and all other office correspondence rapidly. Tracking of ordered tests acts as a 'tickler' file eliminating the risk of losing or forgetting important procedures. We built a proprietary system and purposely avoided using Microsoft Outlook email in order to keep your system safe from malignant viruses, worms and Trojan horses so endemic in the internet today.
7. **e-MDs customizable Rules/Recall engine improves disease and revenue cycle management.** Proper management of chronic disease is not only good medicine – but

profitable medicine when done right. Custom rules allow a practice to build a rule to identify all patients with specific diagnoses that might benefit from an in-house test. For instance, purchasing a bone densitometer is an expensive investment. To justify the expense an office has to be pretty confident that they have the patient population to support it. Imagine if you could query your database for every patient with menopause, every patient that smoked or drank excessively and every patient on corticosteroids. You would not only know if the bone densitometer purchase made good financial sense, but you would be able to maximize its use, perhaps generating twice as much revenue from performing tests than you would be able to do otherwise.

8. **e-MDs makes it easy to participate in clinical studies.** With our EMR charting solution, you can query your database and identify good candidates for research studies. Moreover, with our customizable templates, you can create custom templates to allow collection of data for the research protocol.
9. **e-MDs makes it possible to reach or exceed CMS 'Bridges of Excellence' campaign for optimizing treatment of certain chronic conditions.** CMS has introduced a program to reward participating physicians with bonuses of up to \$10,000 for optimal management of diabetes. e-MDs EMR charting solution makes it much easier to identify, manage and track your patients with chronic disease - making sure that they all receive their HgbA1C, pneumovax or flu shot and other treatment recommendations when due.

So what is the financial impact of each of these points?

#1 and #2. With a decrease in physician/patient documentation and visit time, a physician can comfortably increase the number of patients seen per day without increasing work or stress load. Real world clinic impact studies have demonstrated a 1-2 hour time savings per day **AND** an 8.3% increase in patient volume. Assuming the ability to easily see 3 more patients per day (assumes \$75 average collection) this equates to \$44,000 more revenue per year.

#3 and #4. Improved claim accuracy has resulted in average days outstanding of claims to be 34 days compared to 52 days typical of most systems. Increased average reimbursement per visit of \$20.50 on average equates to a net increase of \$100,000 per doctor per year for a doctor that has 5,000 patient visits per year.

#5. Paper costs 5 cents to print per page. Creating a chart costs \$4. Storage space takes up another \$2-3 per chart, per year. Medical Economics magazine published that paper charts cost \$8 per chart per year. For a practice with 5,000 active charts, the savings is \$40,000 per year.

#6. With internal email and an automated 'tickler file', the savings is in time, aggravation and malpractice exposure. It is difficult to assign a value to this, but for argument's sake, we will say \$10,000 per year.

#7. This varies widely based on in-house testing. For profitable tests and procedures, the impact can easily exceed \$100,000 per practice, per year.

#8. Clinical studies frequently represent 50% or more of a physician's income. e-MD's EMR charting solution simply makes compiling a patient list and performing clinical studies much easier.

#9. 'Bridges of Excellence' will affect few practices today, but with time and EMR adoption, more and more practices will be able to profit from participation.

Conservatively, these benefits add up to a \$154,000 net income gain and a \$50,000 net decrease in overhead per physician. This equates to a positive cash flow of \$15,000 per doctor, per month (\$180,000 per year). A complete e-MDs deployment of hardware and software is less than

\$1,500 per doctor, per month, so the potential net increase in cash flow is \$13,500 per doctor, per month!

Why doesn't everyone adopt EMRs then?

Few EMRs provide the power, ease of use and attention to practice profits as does e-MDs. While many EMRs boast having every feature, few come close to e-MDs in clever execution of those features. Although e-MDs is very easy to use by most EMR standards, it is still foreign to most clinicians and staff. Many offices fail to change long-held, inefficient habits and work patterns necessary to use an EMR successfully. So called "change management" has been identified as the single biggest challenge to deploying technology improvements across an enterprise. Staff are resistant to change, and unless rewarded or they can clearly see the benefit, they may unconsciously sabotage the project before it has a chance to succeed. Training, implementation and quality support are the keys to success.

Implementing an EMR should not be considered an easy task. To achieve desired objectives, your practice may encounter many areas in need of special attention with respect to workflow redesign and possible changes in processes. The reward, however, is great. Medicine becomes fun again. You will find yourself going home early or on time and wonder why you ever waited so long to implement an EMR. Making another \$100,000 per year isn't bad either. Patient care will also be better. There are no negatives for those who persevere, but the path to enlightenment does not happen overnight. Prepare for a few months of ups and downs, frustrations and logjams. Fortunately, e-MDs Solution Series is designed to make the medicine a whole lot easier (and faster) to swallow. We can't cure the common cold, but e-MDs just might be the next best thing! Good luck with your EMR quest.